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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/435,066 12/19/2002

KK

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

Nac

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY PA	SHEETS DRAWING 0	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 2
Verified and Acknowledged	Examiner's Signature Initials				

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## TITLE

Compositions having a plurality of triggered responses

FILING FEE  RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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